

APPLICATION FOR CITY BOARDS & COMMISSIONS

Return application to: 4141 Douglas Drive N, Crystal MN 55422 Fax: (763) 531-1188; Email: trudy.tassoni@crystalmn.gov.

Please check one: New Applicant Reappointment						
Thank you for your interest in serving your community as a volunteer. Please indicate below the board or commission which you would like to be appointed to. (Note eligibility requirements - a member of a board or commission must be a lawful resident of Crystal and, if required, a resident of the Council ward from which they are appointed.) Your application will be kept on file for one year.						
☐ Charter Commission ☐ Parks & Recreation Commission (Ward) ☐ Employee Review Board ☐ Planning Commission (Ward) ☐ Environmental Quality Commission ☐ Watershed Mgt Organization − Bassett Creek ☐ Human Rights Commission ☐ Watershed Mgt Organization − Shingle Creek ☐ NW Hennepin Human Services Council ☐ West Metro Fire Board						
PERSONAL INFORMATION (please print)						
Name Length of residence in Crystal						
First Middle Last Street Address Zip						
Home Phone Work Phone						
Cell Email						
EmployerOccupation						
STATEMENT OF INTEREST Why are you interested in serving on this City board or commission?						
IMPORTANT ISSUES FACING OUR COMMUNITY What do you think are the most important issues facing our community over the next several years?						
Describe what issues and ideas you would like to see addressed by the board or commission you would like to serve on.						

COMMUNITY, CIVIC, OR VOLUNTEER EXPERIENCE Please list your volunteer experience.
ATTENDANCE AND CONFLICT OF INTEREST Are you aware of the meeting schedule for this board or commission and are you able to attend meetings regularly? Yes No (For reappointments only: If you have not been able to attend meetings regularly, please explain:
A conflict of interest may arise by your participation in an activity, action, or decision from which you receive or could potentially receive direct or indirect personal financial gain. Do you have any legal or equitable interest in any business which, in the course of your participation on this board or commission, could give rise to a conflict of interest? (If yes, please provide details on a separate sheet of paper
As a board or commission member, what issue(s) might cause conflict between your civic responsibility and personal or professional interests? How would you manage these conflicts?
NEW APPLICANTS ONLY: Have you attended and observed a commission meeting for which you've made application? Yes, on Not yet, but I will attend a meeting on (date of meeting)
EDUCATION AND PROFESSIONAL EXPERIENCE Describe your education and/or professional experience.
DE A DROINTMENTS ONLY
REAPPOINTMENTS ONLY: COMMISSION OR BOARD HIGHLIGHTS Describe a highlight(s) or accomplishment(s) of the board or commission during your last term.

IMPORTANT INFORMATION CONCERNING YOUR APPLICATION

DATA PRIVACY NOTICE: Minnesota law requires that you be informed of the purposes and intended use of the information you are providing on this application. Pursuant to Minn. Stat. §13.601, your name, address, length of residence, occupation, education, training, civic affiliations, qualifications, and experience are public data and is available to anyone who requests the information.

The information you provide will be used to identify you as an applicant, enable us to contact you when additional information is required, send you notices, and assess your qualifications for appointment. This data is not legally required, but refusal to supply the information requested may affect the City Council's ability to accurately evaluate your application.

Should you be appointed to a board or commission, pursuant to Minn. Stat. §13.601, your residential address will become public information. In addition, either a telephone number or email address where you can be reached will become public. The purpose is to list contact information for commission members on a public roster.

Please select which of the following you will allow listed on a public roster (you <u>must</u> select either email or one phone number):						
☐ EMAIL OR PHONE (may choose more th	nan one):	home	work	cell		
ALL OF THE ABOVE						
I have read the data privacy notice given above and authorize investigation into all statements contained in this application. Furthermore, I authorize the City of Crystal to conduct a criminal history background check, pursuant to Crystal City Code Section 311.01, Subd. 2, for purposes of determining my eligibility for a volunteer position with the City.						
MN Driver's License or MN State ID Number:_						
If known by previous name, provide:						
Applicant's signature		 Date				

Process

- Step 1 Complete an application
- Step 2 Return the completed application to the administrative services coordinator
- Step 3 Participate in a 15-minute interview with the mayor or mayor pro tem, commission chair, and council liaison of the commission
- Step 4 New applicants only: attend a council meeting to be formally appointed to the commission